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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *nm*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *nm*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	<i>Allowance</i> Examiner's Signature	<i>nm</i> Initials		

## ADDRESS

34431

## TITLE

Methods and systems for organizing related communications

<b>FILING FEE RECEIVED</b> 1008	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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